

**FISCAL NOTE
PUBLIC COST**

- I. Department Title: 19 – Department of Health and Senior Services**
Division Title: 25 – State Public Health Laboratory
Chapter Title: 36 – Testing for Metabolic Diseases

Rule Number and Name:	19 CSR 25-36.010 Testing for Metabolic and Genetic Disorders
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Department of Social Services/MO HealthNet Division	\$97,650 annually with projected first year fee increase; \$44,175 additional annually with projected second year fee increase; up to \$223,200 annually in the aggregate with implementation of additional fee increases up to the established fee cap

III. WORKSHEET

Projected first year increase: 15,000 specimen collection forms annually x \$10.50 fee increase for laboratory testing x 62% = \$97,650 annually

Projected second year increase: 15,000 specimen collection forms annually x \$4.75 fee increase for laboratory testing x 62% = \$44,175 additional annually

Maximum increase: 15,000 specimen collection forms annually x \$24 fee increase for laboratory testing x 62% = \$223,200 annually in the aggregate

IV. ASSUMPTIONS

- Estimated 15,000 tests billed each year to MO HealthNet for Medicaid eligible participants.
- The MO HealthNet reimbursement rate is approximately 62% of the newborn screening fee associated with laboratory testing only. The remaining 38% is the state match required by the Department of Social Services. The Department of Health and Senior Services provides the required state match generated from the fees collected for all newborn screening testing.
- The increases anticipated in the first two years (\$10.50 year 1; \$4.75 year 2) are needed to support the costs of testing performed for Lysosomal Storage Disorders (LSD). LSD screening is being implemented as required by HB 716 passed in 2009.
- Additional fee increases will be implemented by DHSS as necessary to financially support inflationary costs and additional testing that may be added to the newborn screening panel in the future. Additional tests would only be implemented after review and approval by the DHSS Genetics Advisory Committee in order to remain in compliance with such recommendations as the Recommended Uniform

Screening Panel (RUSP) of the Secretary's Advisory Committee on Heritable Disorders in Newborns and Children or as required by legislation passed by the Missouri General Assembly.